

Provider Network Detail (Technical Proposal Requirement 6.a)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
<p>H. Are contracting or plan operated Pharmacies identified and denoted by an Rx or RxL?</p> <p>I. Are contracting or plan operated Laboratories identified and denoted by an L or LL?</p> <p>J. Are contracting or plan operated Eye care facilities identified and denoted by an O or OL?</p> <p>K. Are contracting or employed Specialists and ancillary health care providers identified and denoted by an S or SL?</p> <p>L. Is map consistent with lists provided in Technical Proposal Requirements (TPR) 6.c., 6.d., 6.e. and 6.f.?</p>			

Provider Network Detail (Technical Proposal Requirement 6.b)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
<p>22. To what extent did the Proposer submit an index to the map furnished in TPR 6.a. which shows a symbol placed on the map for a Primary Care Provider; specialist; ancillary provider; hospital; or emergency care facility?</p>		5	
<p><u>When evaluating this question, consider the following:</u></p> <p>A. Did the Proposer submit an index identifying the symbols used on the maps?</p> <p>B. Are the types of Primary Care Providers identified?</p> <p>C. Is the calculation of FTE Primary Care Providers available to Medi-Cal Members at each Primary Care site and the aggregate number of Medi-Cal Members that can be assigned to each site noted?</p> <p>D. Are Traditional and Safety-Net Providers identified?</p> <p>E. Are the types of specialists identified?</p>			

Provider Network Detail (Technical Proposal Requirement 6.c)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
<p>23. To what extent did the Proposer provide a complete list of Physicians who will provide covered physician services to Medi-Cal members? Are lists arranged by Physician specialty and zip code and separated for Primary</p>		5	

Provider Network Detail (Technical Proposal Requirement 6.c)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
Care Physicians and specialists?			
<p><u>When evaluating this question, consider the following:</u></p> <p>A. Did the Proposer include separate hard copy lists for 1) Network Primary Care Physicians and 2) Specialists?</p> <p>B. Is information presented according to Appendix 12 for Primary Care Physicians and Appendix 13 for Specialists?</p> <p>C. Are Primary Care Physicians categorized by specialty and within each zip code (i.e., Internist, Family Practice, Pediatrician, Obstetrician)?</p> <p>D. Has Proposer submitted Primary Care Physician information in Microsoft Excel or Access formats (1997 or 2000 version) or in an ASCII text file and in the format specified in Appendix 14?</p> <p>E. Is the Primary Care Physician listing consistent with information presented on map (see TPR 6.a.)?</p> <p>F. Are Primary Care Physicians located within 10 miles or 30 minutes from any beneficiary resident point?</p> <p>G. Is the Member capacity of Primary Care Physicians (based on full-time equivalents) in compliance with the 1:2000 ratio?</p> <p>H. Is the number and location of Pediatricians and OB/GYN Physicians relative to beneficiary residences reasonable and consistent with DHS's goal to improve access to these services?</p> <p style="text-align: center;">Specialists:</p> <p>I. Are Specialists categorized by specialty and within each zip code?</p> <p>J. Has Proposer submitted Specialist information in Microsoft Excel or Access formats (1997 or 2000 version) or in an ASCII text file and in the format specified in Appendix 14?</p> <p>K. Is the Specialist Physician listing consistent with information presented on map (see TPR 6.a.)?</p> <p>L. Does the network include the following core Specialists?</p> <ol style="list-style-type: none"> 1) Allergist and immunologists 2) Anesthesiologists 3) Cardiologists 4) Dermatologists 5) Endocrinologists 6) Gastroenterologists 7) Hematologists/Oncologists 8) Infectious Disease 			

Provider Network Detail (Technical Proposal Requirement 6.c)		Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
9) Geneticists 10) Neonatologists 11) Nephrologists 12) Neurologists 13) Neurosurgeons 14) Ophthalmologists 15) Orthopedic surgeons 16) Otolaryngologists 17) Podiatrists 18) Pathologists 19) Perinatologist 20) Physical Medicine and Rehabilitation Specialists 21) Pulmonary Specialists 22) Radiologists/Nuclear Medicine Specialists 23) Rheumatologists 24) Surgeons 25) Trauma Medicine Specialists 26) Urologists				
M. Is information consistent with information provided in TPR and 6.b. above?				

Provider Network Detail (Technical Proposal Requirement 6.d)		Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
24.	To what extent did the Proposer submit a list of all non-physician medical practitioners including nurse practitioners, nurse midwives, and physician assistants in the proposed network? Did the Proposer arrange the list by the supervising Physician's specialty (or for midwives' advisory physician's specialty) and by zip code?		5	
<u>When evaluating this question, consider the following:</u>				
A. Has Proposer included non-physician medical practitioner information in the format specified in Appendix 15, Non-Physician Medical Practitioners?				
B. Is non-physician medical practitioner listing consistent with information presented on map (see TPR 6.a.)?				
C. Do any non-physician medical practitioners have independent practices? Does the availability of non-physician medical practitioners enhance the availability of Primary Care in the network?				
D. Does Proposer have at least one contracting mid-wife?				

Provider Network Detail (Technical Proposal Requirement 6.e)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
25. To what extent did the Proposer submit complete information on all other providers not included in the Physician, non-physician medical practitioner, and hospital listings that will provide services to Medi-Cal Members?		5	
<p><u>When evaluating this question, consider the following:</u></p> <p>A. Did the Proposer submit the following information:</p> <ol style="list-style-type: none"> 1) Name of provider. 2) Street address of provider, and a list of facility sites at which services are rendered. 3) Business classification (such as: professional corporation, sole proprietor, partnership). 4) License number. 5) The health care services it provides to enrollees of the plan (e.g., home health agencies, ambulance services, laboratory, pharmacy, skilled nursing facility, surgery-centers, mental health, family planning, etc.). 6) Hours of operation and the provision made for after-hours service (i.e., Monday through Friday 8-5, closed Wednesdays). 7) Relationship to the contractor (owned by, contracting with, etc.). 8) If entity is a Traditional or Safety-Net Provider. <p>B. Is the response consistent with information provided in TPRs 6.a and 6.b. above?</p> <p>C. Are pharmacies and laboratory services easily accessible and located in all areas of the county?</p>			

Provider Network Detail (Technical Proposal Requirement 6.f)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
26. To what extent did the Proposer provide information for each hospital providing services to Medi-Cal Members?		5	

Medical Expense Ratio (Technical Proposal Requirement 8.b)	3	X	50	=	150
Claims Processing/Monitoring (Technical Proposal Requirement 8.c.1.)	3	X	10	=	30
(Technical Proposal Requirement 8.c.2.)	3	X	10	=	30
Provider Incentive Plans Technical Proposal Requirement 8.d)	3	X	10	=	30
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Total Possible Points	3	X	100	=	300
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Evaluation Criteria

Provider Compensation (Technical Proposal Requirement 8.a)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
34. To what extent does the Proposer explain/disclose how the following contracting providers are likely to be compensated?		20	
<p><u>When evaluating this question, consider the following:</u></p> <p>A. Did Proposer provide the required explanation/documentation?</p> <p>B. Are the schedules of capitation rates, per diem rates and/or fee-for-service rates included for each of the following types of providers?</p> <ol style="list-style-type: none"> 1) Primary Care Providers 2) Medical Groups and Independent Practice Associations 3) Specialists 4) Hospitals 5) Pharmacies <p>C. Do the compensation arrangements with the provider network appear adequate to maintain the continuation of services to members?</p> <p>Responses to TPR 8.a are Confidential and Proprietary</p>			

Medical Expense Ratio (Technical Proposal Requirement 8.b)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
35. Does Proposer submit their expected overall medical expense ratio (Total Medical Expenses/Total Revenues) for the proposed Service Area based on expected compensation arrangements?		50	
<p><u>When evaluating this question, consider the following:</u></p>			

Medical Expense Ratio (Technical Proposal Requirement 8.b)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
If the Medical Expense Ratio reasonably agrees with the ratios calculated on the Proposer's projected financial statements, compare that to the scale below. If not, use the lower of the Medical Expense Ratios for scoring this section.			
<u>Medical Expense Ratio</u>	<u>Pts</u>		
>92.1%	0		
90.1 – 92.0 %	2		
88.0 – 90.0 %	3		
85.0 – 87.9 %	2		
80.0 – 84.9%	1		
<80.0 %	0		

Provider Claims (Technical Proposal Requirement 8.c.1)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
36. To what extent does the Proposer submit the required claims history report for at least the last six months that identifies the percentage of “clean” claims paid within 30, 60 and 90 days of receipt?		10	
In reviewing the Proposer’s report, use the following point allocation.			
To determine the percentage, use the following formula: Total Claims Processed in 30 days or less / Total Claims Submitted			
<u>Percent</u>	<u>Days</u>	<u>Pts</u>	
> 98.0%	30 days or less	3	
94.1%-98.0%	30 days or less	2	
90.0%-94.0%	30 days or less	1	
< 90.0 %	30 days orless	0	

Provider Claims (Technical Proposal Requirement 8.c.2.)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
37. Has Proposer submitted the average number of claims processed per month, number of denials per month and the number of provider claims appeals received per month for the last six months?		10 Total (See below)	

D.	Prenatal Care within 7 days of request? >14 days 0 pts 8-14 days 2 pts <u>≤ 7 days</u> 3 pts		5	
E.	Children's Preventive Periodic Health Assessments (Well Child) appointments within 14 days of request? >14 days 0 pts 8 -14 days 2 pts <u>≤ 7 days</u> 3 pts		5	
F.	Initial Health Assessments within 120 days of enrollment? > 120 days 0 pts ≤ 120 days 3 pts		5	

Provider Compliance with Accessibility Standards (Technical Proposal Requirement 9.b)		Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
40.	To what extent does the Proposer describe an organized system to communicate, enforce and monitor provider compliance with accessibility standards that includes the following?		20	
<p>A. Provider manual.</p> <p>B. Provider training.</p> <p>C. Provider newsletters.</p> <p>D. Facility Site Reviews.</p> <p>E. Collection of data from Providers.</p> <p>F. Review of Provider Reports of actual time Members waited to get appointment times.</p> <p>G. Review of Quality Improvement activities related to appointment standards.</p> <p>H. Recruitment of specialties to reduce appointment waiting time.</p>				

Culturally and Ethnically Diverse Populations (Technical Proposal Requirement 9.c.)		Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
41.	To what extent does the Proposer's past experience include the following activities?		20	
<p>A. Health Education materials translated into different languages.</p> <p>B. Experience developing Health Education materials and programs.</p> <p>C. Contractual relationships with ethnically diverse Providers.</p> <p>D. Translation of written member informing materials.</p> <p>E. Experience with Community Based Organizations (CBOs).</p> <p>F. Assessing, identifying and tracking the linguistic capability of bilingual staff etc., used as interpreters.</p>				

Culturally and Ethnically Diverse Populations (Technical Proposal Requirement 9.d.)		Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
42.	To what extent does the Proposer describe current and/or proposed policies include the following?		20	
<p>A. The assessment of the performance of individuals who provide linguistic services.</p> <p>B. If delegated, guidelines for the translation of Health Education and member informing materials.</p> <p>C. Requirement for Providers to collaborate with CBOs to address the cultural issues/needs of its members.</p> <p>D. Contract requirement that interpreters are available or will be provided for limited english proficient members at every point of contact, i.e. telephone calls, office visits etc.</p> <p>E. Description of how Proposer will perform the contractually required Group Needs Assessment (GNA).</p> <p>F. Provision for Plan and Provider to incorporate changes based on findings of the GNA, to improve the access of the ethnically and linguistically diverse members.</p>				

Methodologies for Disease Management Systems (Technical Proposal Requirement 11.c.)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
<p>C. Is there a description of the actual approaches to disease management which include the following?</p> <p>1) Mailing of written materials, telephone calls, and patient incentives.</p> <p>2) Outreach to providers as well as patients.</p> <p>D. Does the response include a description of the methods used to evaluate the effectiveness of the disease management programs, including what measures are used?</p> <p>E. Does Proposer describe any new disease management programs proposed for the Medi-Cal population?</p>			

Delegation (Technical Proposal Requirement 11.d)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
51. To what extent does the Proposer describe its oversight of delegated or contracted Case Management and Coordination of Care activities?		20	
<p><u>When evaluating this question, consider the following:</u></p> <p>A. Does the Proposer provide a clear definition of services that are delegated?</p> <p>B. To what extent does the Proposer identify a specific person responsible for oversight?</p> <p>C. Do oversight and monitoring procedures include a process to ensure adequacy of services provided?</p>			

FINAL SCORE: Case Management and Coordination of Care

Total Points Earned _____

12. LOCAL HEALTH DEPARTMENT COORDINATION

There is no Evaluation Criteria for Local Health Department Coordination.

13. MEMBER SERVICES

<u>Summary of Points</u>	<u>Maximum Score</u>		<u>Weight</u>		<u>Total Pts. Possible</u>
Member Services Program (Technical Proposal Requirement 13.a)	3	X	15	=	45

Member Services Experience/ Proposed Processes (Technical Proposal Requirement 13.b)	3	X	45	=	135
Member Call Center (Technical Proposal Requirement 13.c.1)	3	X	10	=	30
(Technical Proposal Requirement 13.c.2)	3	X	10	=	30
(Technical Proposal Requirement 13.c.3)	3	X	10	=	30
Innovative Member Services Activities Technical Proposal Requirement 13.d)	3	X	10	=	30
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Total Possible Points	3	X	100	=	300

Evaluation Criteria

Member Services Program (Technical Proposal Requirement 13.a)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
52. To what extent does the Proposer submit an organization chart that includes the functions of member services staff; the ratio of member service representatives (MSRs) to members; and reporting relationships of member services staff to other areas within the organization?		15	

Member Services Experience/Proposed Processes (Technical Proposal Requirement 13.b)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
53. To what extent does the Proposer describe its experience and proposed processes for the items below? When evaluating this question, consider the following:		45	
<p>A. Translation of written member materials:</p> <ol style="list-style-type: none"> 1) Is translation of member materials conducted by a qualified translator, as described in Enclosure III of MMCD Policy Letter 99-04? 2) Are translated materials certified by a professional translator? 3) Are translations performed in all threshold languages? 4) Does the Proposer identify a specific individual responsible for ensuring the development and dissemination of all translated materials? 5) Is there a process to identify members that need translated materials? <p>B. Assessment and application of readability levels.</p> <ol style="list-style-type: none"> 1) Does Proposer describe a recognized system such as the "SMOG" (Simplified measure of Gobbledygook, developed by McLaughlin) to verify that materials are written at the appropriate reading level? 			

Member Services Experience/Proposed Processes (Technical Proposal Requirement 13.b)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
<p>2) Does Proposer identify a specific individual responsible for ensuring the readability level of all member materials?</p> <p>C. Hiring multi-lingual member service representatives (MSRs).</p> <p>1) Does Proposer have employment policies for the hiring of MSRs in the threshold languages and or additional languages?</p> <p>2) Does Proposer describe a systematic method for monitoring language needs of members (e.g., recording and tallying from welcome calls, orientation sessions, and member service interactions)?</p> <p>3) Are MSRs tested to determine their ability to effectively converse in languages other than English?</p>			

Member Call Center (Technical Proposal Requirement 13.c.1)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
54. To what extent does the Proposer provide a clear description of its call center and mechanisms for monitoring the quality of service provided by the MSRs?		10	
<p><u>When evaluating this question, consider the following:</u></p> <p>A. Does Proposer present a systematic method for monitoring the quality of service provided by its member service call center?</p> <p>B. Is there a system to track the number and type of calls?</p>			

Member Call Center (Technical Proposal Requirement 13.c.2)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
55. To what extent does the Proposer's call center report include the following information?		10	
<p>Average time that it takes a member's call to be answered by a live voice:</p> <p>1-2 minutes = 3 points</p> <p>3-5 minutes = 2 points</p> <p>6-10 minutes = 1 point</p> <p>>10 minutes = 0 points</p>			

Member Call Center (Technical Proposal Requirement 13.c.3)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
56. To what extent does the Proposer's call center report include the following information?		10	
Average monthly abandonment rate for the call center? Monthly abandonment rate ≤ 5% = 5 points Monthly abandonment rate > 5% = 0 points			

Innovative Member Services Activities (Technical Proposal Requirement 13.d)	Points Awarded (0-3)	Multiplied by Weight	Equals Total Points Earned
57. To what extent does Proposer describe member services activities beyond Contract requirements that have the potential of improving access to care, quality of care and/or member satisfaction?		10	

FINAL SCORE: Member Services**Total Points Earned _____****14. MEMBER GRIEVANCE SYSTEM**

<u>Summary of Points</u>	<u>Maximum Score</u>		<u>Weight</u>		<u>Total Pts. Possible</u>
Member Grievance System Staffing (Technical Proposal Requirement 14.a)	3	X	30	=	60
Member Services Experience/Grievance Trends (Technical Proposal Requirement 14.b)	3	X	60	=	180
Innovative Activities (Technical Proposal Requirement 14.c)	3	X	10	=	30
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Total Possible Points	3	X	100	=	300